



Water Resources Program

Application for a Water Right Permit

For Ecology Use
(Date Stamp)

11 SEP 19 A8:45

☒ SURFACE WATER ☐ GROUND WATER ☒ PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

RECEIVED

SEP 22 2011

Applicant/Business Name:	Moore Kantola Nielsen Lake Property	Phone No:	425-392-1921	Other No:	
Address:	24009 SE 103 rd St				
City:	Issaquah	State:	WA	Zip:	98027
Email Address (optional):	dozer-man@msn.com				

Contact Name (if different from above):	Ella Moore	Phone No:	425-392-5545	Other No:	
Relationship to Applicant:	part owner				
Address:	2731 204 th Ave SE				
City:	Sammamish	State:	WA	Zip:	98075
Email Address (optional):	ermoore1936@hotmail.com				

Legal Land Owner or Part Owner Name of the Proposed Place of Use:	Moore Kantola Nielsen families	Phone No:	425-392-1921	Other No:	
Address:	24009 SE 103 rd St				
City:	Issaquah	State:	WA	Zip:	98027
Email Address (optional):	dozer-man@msn.com				

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Purchase water rights from Jerald Williams' senior water rights (Court Claim No.01746, Water right Change Application No. CS4-0174CTCLsb10) to mitigate the use of domestic water on our lot.

Anticipated length of time to complete your project: Cabin and water distribution system are existing

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Domestic-single	8	0.03	Seasonal

For Ecology Use	APPLICATION NO: <u>54-35522</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>50⁰⁰</u>	Check No: <u>1524</u>
	ECY Coding: 001-001-WR1-0285-000011	
Date Returned	By	Priority Date <u>09-19-2011</u>
	By <u>39</u>	WRIA: <u>KITTING</u>

The meter & bounds for
this ~~site~~^{source} put it on
~ parcel ID 658836
owned by Alan Eddy.

If you reverse them
you would get closer -
it would put source
on parcel 056835
owned by Lake Kachess
Cabin Owners - which
matches their map.

sk

TOTAL:	8	0.03	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL
(Complete A or B, and C below)

A.) If Surface Water Source				B.) If Ground Water Source			
<input checked="" type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____				<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____			
Source Name: no name				Well diameter & depth: _____			
Tributary to: Lake Kachess				Number of proposed points of withdrawal: _____			
Number of proposed diversion points: 1				Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				If available, attach Water Well Report and pump test.			
Well Tag ID No. _____							
C.) Point of Diversion/Withdrawal – Legal Description							
Parcel No.	¼	¼	Section	Township	Range	County	
532736	NW	NE	21	21	13	Kittitas	
Lot(s)	Block(s)		Subdivision				
A3							
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: 600 Feet (<input type="checkbox"/> North/ <input checked="" type="checkbox"/> South) and 1500 feet (<input type="checkbox"/> East/ <input checked="" type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ____) corner of Section 21.							
Parcel No.	¼	¼	Section	Township	Range	County	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: ____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and ____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> ____) corner of Section ____							

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO
Provide the owner name(s), address, and phone number: Lake Kachess Cabin Owners, %Robin Morissey,
7224 N. Fotheringham St, Spokane WA 99205. Phone: 509-953-7158

Section 4. PLACE OF USE

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____ By _____ WRIA: _____

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Lot A-3, Lake Kachess Summer Home Sites, in the County of Kittitas, State of Washington, as per plat thereof recorded in Book 4 of Plats, pages 23 and 24, records of said County						
1/4	1/4	Section	Twp.	Range	County	Parcel No.
NW	NE	21	21	13	Kittitas	532736

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO
Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): The existing water system consists of a 2" plastic pipe that diverts water to a 300 gallon water storage tank located at the spring. A plastic pipe delivers water by gravity from the storage tank down the hill to our cabin

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION
(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: 1	Present population to be served water: _____
Type of connections: <u>recreational cabin</u> <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 0 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock:0

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: No other uses

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☐ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: There is an existing 300 gallon plastic water storage tank at the spring

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: Nearing Easton on Eastbound I-90, take Exit 70. At the stop sign turn left (North) Cross I-90 and turn left onto Sparks Road. Drive .08 miles and turn right onto the Kachess Dam Road (FS4818). Drive 4 miles to 6350 Kachess Dam Road. This is lot A-3, Cabin is on the left

Site Address: _____

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

MARVIN NIELSEN
Print Name
(Applicant or authorized representative)

Marvin Nielsen
Signature
Date 9-12-11

ELLA R MOORE
Print Name
(Legal Owner or Part Owner Place of Use)

Ella R Moore
Signature
Date 9-14-11

SUSAN K NIELSEN
Print Name
(Legal Owner or Part Owner Place of Use)

Susan Nielsen
Signature
Date 9-14-11

RODY KANTOLA
Print Name
(Legal Owner or Part Owner Place of Use)

Rody Kantola
Signature
Date 9-14-11

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input checked="" type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300